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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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FORM	

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission (including this sheet)

Application Number	10/821,660				
Filing Date	April 9, 2004				
First Named Inventor	Alan L. Rockwood et al.				
Group Art Unit	2881				
Examiner Name	Paul M. Gurzo				
Attorney Docket No.	3001.BYU.NP				
	1				

ENCLOSURES (check all that apply)							
	⊠ Extension of Time Request	<ul> <li>Maintenance Fee Transmittal        year</li> <li>Missing Parts Response</li> <li>Notification of Change of Attorney         Address &amp; Docket Number</li> <li>Return Postcard</li> <li>Revocation &amp; Power of Attorney</li> <li>Status Inquiry</li> <li>Other:</li> </ul>					
□ Check in the amount of \$     □ Credit card authorization in the amount of \$60.00     □ Declaration & Power of Attorney     □ Drawings sheets     □ Formal □ Informal							
SIGNA	TURE OF APPLICANT, ATTORNEY OR	AGENT					
Attorney for Applicant  David W. O'Bryant, Registration No. 39,793  MORRISS O'BRYANT COMPAGNI, P.C.  136 South Main Street, Suite 700  Salt Lake City, Utah 84101  (801),478-0071 telephone; (801) 478-0076 facsimile							
Signature	W. O Bost	Date //8/06					
CEF	RTIFICATE OF MAILING UNDER 37 CFR	§ 1.8					
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, on the date indicated below, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.							
Typed or Printed Name David	Typed or Printed Name David W. O'Bryant						
Signature Signature	( ) long t	Date /18/06					

O/SB/17 /12-0	141

## FEE TRANSMITTAL for FY 2005

TOTAL AMOUNT OF

Signature

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	Complete if Known	
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Attorney Docket No.	3001.BYU.NP	A ST
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Date

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Check Solvential Created and that apply   Solvential Created   Money Order   None   Other (please identify)   Solvential Compagnial PC   Professional Cocount Number: S0-0881   Deposit Account Name: Morriss O'Bryant Compagnial PC   For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   Charge fee(s) indicated below, except for the filling fee   Charge fee(s)   Fee (s)   Fee (s)   Fee (s)   Fee (s)   Fee   Simplified fee   Simpl	PAYMENT				y Docket No.		300	I.DIU.NF			O CO	<u> </u>
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1. BASIC FILING, SEARCH, AND EXAMINATION FEES   SEARCH FEES   SEAMINATION FEES				rpayments	of fee(s)	×	Cred	it any overpaymo	ents			
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Application Type	1. BASIC FILING,	SEARCH,	AND EXAMINA	ATION FEE	ES							<del></del>
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Design   200   100   100   50   130   65	Application Type	Fee			Fee (\$)				<u>(\$)</u>			Paid (\$)
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25  Each independent claims over 3, or for Reissues, each independent claim more than in the original patent 360 180  Multiple Dependent claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$) Multiple Dependent Claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$) Multiple Dependent Claims  Fee (\$) Fee Paid (\$)  HP= highest number of totals claims paid for, if greater than 20  Indep. Claims  -3 or HP  HP= highest number of independent claims paid for, if greater than 3  APPLICATION SIZE FEE  H1 fee perification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35. U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction  thereof  -100= /50= (round up to a whole number) x  Fee \$Paid (\$)  Fee Paid (\$)	Design Plant Reissue		200 100 200 100 300 150		100 300 500	: 1	50 50 50		130 160 600	65 80 300		
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